



12th Annual Missouri Interpreters Conference 2005



EVENT TICKET ORDER FORM

(PLEASE PRINT CLEARLY)

Name _____
(Last Name) (First Name)

Address _____
(Street Address)

(City) (State) (Zip)

Work Phone/TTY _____ Home Phone/TTY _____

Email _____ FAX _____

☐ **OPENING & KEYNOTE PRESENTATION**

Friday, October 28, 2005
7:00 p.m. - 9:00 p.m.
Dr. Carol Patrie
\$30.00 (for any attendee who is not a conference registrant)

☐ **SATURDAY LUNCHEON with FREE TICKET to the "BEACH PARTY"**

(Peter Cook's performance not included)
Saturday, October 29, 2005
12:00 p.m. - 1:30 p.m. (lunch) & 9:30 p.m. - 1:00 a.m. (Beach Party)
\$20.00 (for any attendee who is not a conference registrant)
Please indicate if you have any special dietary needs. We will make every effort to accommodate you.
diabetic _____ vegetarian _____ Other _____

☐ **BEACH PARTY**

Saturday, October 29, 2005
9:30 p.m. - 1:00 a.m.
\$10.00 (for attendee who is not a conference registrant)

☐ **PETER COOK with FREE TICKET to the "BEACH PARTY"**

Saturday, October 29, 2005
8:00 p.m. - 1:00 a.m.
\$30.00 (for attendee who is not a conference registrant)

☐ **CLOSING & ENDNOTE**

Sunday, October 30, 2005
11:00 a.m. - 12:30 p.m.
\$30.00 (for any attendee who is not a conference registrant)

Make checks payable to: MCDHH/BCI Fund.

Mail registration form and payment to
Missouri Interpreters Conference
1103 Rear Southwest Boulevard
Jefferson City, MO 65109

**Please call the Missouri Commission for the Deaf and Hard of Hearing at
(573) 526-5205 (V/TTY) if you want verification that your registration has been received.**

Thank you for registering. See you at the conference!